

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	9/1/01
FORMALITY REVIEW	HL	679	09/29/01
RESPONSE FORMALITY REVIEW	HL	712	12-06-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
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5	
6	✓
7	0
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12	✓
13	✓
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18	✓
19	0
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24	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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373  
12-22-01  
2740  
10-27-01